

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

NORTH DAKOTA REPUBLICAN PARTY

ADDRESS (number and street)

1029 N 5th Street

☐Check if different  
than previously  
reported. (ACC)

Bismarck

ND

58501

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00018929

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☒

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2011

through

07

31

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mr. Robert Harms

Signature of Treasurer

Electronically Filed by Mr. Robert Harms

Date

08

19

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
NORTH DAKOTA REPUBLICAN PARTY

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2011	83450.01
(b) Cash on Hand at Beginning of Reporting Period .....	80082.55	
(c) Total Receipts (from Line 19) .....	2961.50	132147.60
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	83044.05	215597.61
7. Total Disbursements (from Line 31) .....	17077.72	149631.28
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	65966.33	65966.33
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

NORTH DAKOTA REPUBLICAN PARTY

Report Covering the Period:

From:

M M  
0 7D D  
0 1Y Y Y Y  
2 0 1 1

To:

M M  
0 7D D  
3 1Y Y Y Y  
2 0 1 1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	0.00	47611.50
(ii) Unitemized .....	961.50	79099.60
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	961.50	126711.10
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	3436.50
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	961.50	130147.60
12. Transfers From Affiliated/Other Party Committees .....	2000.00	2000.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....		
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	2961.50	132147.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2961.50	132147.60

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	411.59	6353.26	
(ii) Non-Federal Share.....	1058.35	16336.82	
(b) Other Federal Operating Expenditures.....	7816.41	69877.27	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	9286.35	92567.35	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	5189.52	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	-75.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	-75.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	7791.37	51949.41	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	7791.37	51949.41	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	17077.72	149631.28	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16019.37	133294.46	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	961.50	130147.60
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	-75.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	961.50	130222.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	8228.00	76230.53
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	8228.00	76230.53

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH DAKOTA REPUBLICAN PARTY

**A.**

Full Name (Last, First, Middle Initial)

District 1, ND Republican Party

Mailing Address PO Box 2237

City

Williston

State

ND

Zip Code

58802

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 5 / 2 0 1 1

Transaction ID: 0157302

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

2000.00

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 7 / 17

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

NORTH DAKOTA REPUBLICAN PARTY

**A. Full Name (Last, First, Middle Initial)**

Starion Financial

Mailing Address

PO Box 777

City

Bismarck

State

ND

Zip Code

58502-0777

001

Purpose of Disbursement:

Bank Fees

Category/  
Type

Activity or Event Identifier:

Bank Fees

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

21270.09

Date

M M / D D / Y Y Y Y

0 7 / 0 7 / 2 0 1 1

Transaction ID: 0157563

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

13.99

35.96

49.95

**B. Full Name (Last, First, Middle Initial)**

Red River Fair

Mailing Address

PO Box 797

City

West Fargo

State

ND

Zip Code

58078-0797

001

Purpose of Disbursement:

Booth Rental/Fair

Category/  
Type

Activity or Event Identifier:

Booth Rental/Fair

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

21310.09

Date

M M / D D / Y Y Y Y

0 7 / 0 7 / 2 0 1 1

Transaction ID: 0157564

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

11.20

28.80

40.00

**C. Full Name (Last, First, Middle Initial)**

Montana-Dakota Utilities

Mailing Address

PO Box 1457

City

Bismarck

State

ND

Zip Code

58502-1457

001

Purpose of Disbursement:

Utilities-Electricity

Category/  
Type

Activity or Event Identifier:

Utilities-Electricity

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

21717.10

Date

M M / D D / Y Y Y Y

0 7 / 1 4 / 2 0 1 1

Transaction ID: 0157571

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

113.96

293.05

407.01

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

139.15

357.81

496.96

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 8 / 17

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

NORTH DAKOTA REPUBLICAN PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Balloon's Etc.

Mailing Address

1529 University Dr S

City	State	Zip Code
Fargo	ND	58103

001

Purpose of Disbursement:  
Supplies/OfficeCategory/  
TypeActivity or Event Identifier:  
Supplies/Office

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

21731.25

Date 07 / 14 / 2011

Transaction ID: 0157566

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.96

10.19

14.15

**B. Full Name (Last, First, Middle Initial)**  
 Green Mill

Mailing Address

3340 13th Avenue South

City	State	Zip Code
Fargo	ND	58103

002

Purpose of Disbursement:  
Staff/Travel-ExpenseCategory/  
TypeActivity or Event Identifier:  
Staff/Travel-Expense

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

21760.95

Date 07 / 14 / 2011

Transaction ID: 0157567

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

8.32

21.38

29.70

**C. Full Name (Last, First, Middle Initial)**  
 Mac's Hardware

Mailing Address

4200 Main Ave

City	State	Zip Code
Fargo	ND	58103

001

Purpose of Disbursement:  
Supplies/OfficeCategory/  
TypeActivity or Event Identifier:  
Supplies/Office

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

21770.08

Date 07 / 18 / 2011

Transaction ID: 0157578

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2.56

6.57

9.13

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

14.84

38.14

52.98

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE	9 / 17
FOR LINE 21a OF FORM 3X	

NAME OF COMMITTEE (In Full)

NORTH DAKOTA REPUBLICAN PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Sylvester Management

Mailing Address

PO Box 986

City	State	Zip Code
Irmo	SC	29063

001

 Purpose of Disbursement:  
 Facility Rental Expense
Category/  
Type
 Activity or Event Identifier:  
 Facility Rental Expense

Type of Allocated Activity:

☒ Administrative   ☐ Fundraising   ☐ Exempt  
☐ Voter Drive   ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

22295.08

 Date   

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	8	/	2	0	1	1

Transaction ID: 0157579

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
147.00		378.00		525.00

**B. Full Name (Last, First, Middle Initial)**  
 Office of the State Tax Commissioner

Mailing Address

600 E Boulevard Ave, Dept 127

City	State	Zip Code
Bismarck	ND	58505

001

 Purpose of Disbursement:  
 ND State Income Tax
Category/  
Type
 Activity or Event Identifier:  
 ND State Income Tax

Type of Allocated Activity:

☒ Administrative   ☐ Fundraising   ☐ Exempt  
☐ Voter Drive   ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

22690.08

 Date   

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	1	/	2	0	1	1

Transaction ID: 0157588

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
110.60		284.40		395.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
257.60		662.40		920.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
411.59	1058.35	1469.94

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORTH DAKOTA REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Northland Financial	<b>Transaction ID:</b> 0157560 <b>Date of Disbursement</b>
Mailing Address PO Box 140	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 6 / 2 0 1 1</div> </div>
City Steele State ND Zip Code 58482-0140	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Copier Lease/Fargo Candidate Name	<div> <div>307.16</div> <div>001 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Midwest Business Systems	<b>Transaction ID:</b> 0157559 <b>Date of Disbursement</b>
Mailing Address 807 E Century Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 6 / 2 0 1 1</div> </div>
City Bismarck State ND Zip Code 58503-0529	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Copier Maintenance Expense Candidate Name	<div> <div>319.00</div> <div>001 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Heritage Foundation	<b>Transaction ID:</b> 0157562 <b>Date of Disbursement</b>
Mailing Address 214 Massachusetts Avenue, NE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 7 / 2 0 1 1</div> </div>
City Washington State DC Zip Code 20002	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Supplies/Office-Books Candidate Name	<div> <div>201.56</div> <div>001 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**827.72**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORTH DAKOTA REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Dee Stanley	<b>Transaction ID:</b> 0157576 <b>Date of Disbursement</b>																				
Mailing Address 1600 Mapleton #211	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	4		2	0	1	1												
City Bismarck State ND Zip Code 58503	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Staff/Travel-Expense Candidate Name	<table border="1"> <tr> <td colspan="10">357.74</td> </tr> </table>	357.74																			
357.74																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Brady Martz	<b>Transaction ID:</b> 0157570 <b>Date of Disbursement</b>																				
Mailing Address PO Box 1297	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	4		2	0	1	1												
City Bismarck State ND Zip Code 58502-1297	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Accounting Expense Candidate Name	<table border="1"> <tr> <td colspan="10">585.94</td> </tr> </table>	585.94																			
585.94																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Midwest Business Systems	<b>Transaction ID:</b> 0157572 <b>Date of Disbursement</b>																				
Mailing Address 807 E Century Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	4		2	0	1	1												
City Bismarck State ND Zip Code 58503-0529	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Copier Maintenance Expense Candidate Name	<table border="1"> <tr> <td colspan="10">1018.48</td> </tr> </table>	1018.48																			
1018.48																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1962.16

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NORTH DAKOTA REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Acuity Insurance Company	<b>Transaction ID:</b> 0157575 <b>Date of Disbursement</b>																				
Mailing Address PO Box 718	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	4		2	0	1	1												
City Sheboygan State WI Zip Code 53082-0718	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Insurance Expense Candidate Name	<table border="1"> <tr> <td colspan="10">557.40</td> </tr> </table>	557.40																			
557.40																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Internal Revenue Service	<b>Transaction ID:</b> 0157565 <b>Date of Disbursement</b>																				
Mailing Address 324 25th St Ste 6025	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	4		2	0	1	1												
City Ogden State UT Zip Code 84401-2342	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement 941 Federal Payroll Tax Candidate Name	<table border="1"> <tr> <td colspan="10">1032.12</td> </tr> </table>	1032.12																			
1032.12																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Job Service North Dakota	<b>Transaction ID:</b> 0157587 <b>Date of Disbursement</b>																				
Mailing Address PO Box 5507	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	1		2	0	1	1												
City Bismarck State ND Zip Code 58506-5507	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement State Unemployment Tax/Job Service Candidate Name	<table border="1"> <tr> <td colspan="10">401.36</td> </tr> </table>	401.36																			
401.36																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1990.88

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORTH DAKOTA REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Laurie Lynn Eisenbeis	<b>Transaction ID:</b> 0157582 <b>Date of Disbursement</b>
Mailing Address 2205 Highway 1806 S	<input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/>
City Fort Rice State ND Zip Code 58554-5133	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Staff/Travel-Expense Candidate Name	<input type="text" value="1046.77"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Dee Stanley	<b>Transaction ID:</b> 0157584 <b>Date of Disbursement</b>
Mailing Address 1600 Mapleton #211	<input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/>
City Bismarck State ND Zip Code 58503	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Staff/Travel-Expense Candidate Name	<input type="text" value="227.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Pitney Bowes Credit Corp	<b>Transaction ID:</b> 0157581 <b>Date of Disbursement</b>
Mailing Address PO Box 856460	<input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/>
City Louisville State KY Zip Code 40285-6460	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Postage Expense Candidate Name	<input type="text" value="500.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**1773.77**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NORTH DAKOTA REPUBLICAN PARTY

A.

Full Name (Last, First, Middle Initial)

Internal Revenue Service

Mailing Address 324 25th St Ste 6025

City  
Ogden

State  
UT

Zip Code  
84401-2342

Purpose of Disbursement  
941 Federal Payroll Tax

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 0157580

Date of Disbursement

07 / 21 / 2011

Amount of Each Disbursement this Period

1032.15

SUBTOTAL of Disbursements This Page (optional) .....

1032.15

TOTAL This Period (last page this line number only) .....

7586.68

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NORTH DAKOTA REPUBLICAN PARTY

A.

Full Name (Last, First, Middle Initial)

Ms. Laurie Lynn Eisenbeis

Mailing Address 2205 Highway 1806 S

City State Zip Code  
Fort Rice ND 58554-5133

Purpose of Disbursement

Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 0157573

Date of Disbursement

07 / 14 / 2011

Amount of Each Disbursement this Period

2482.19

B.

Full Name (Last, First, Middle Initial)

Ms. Dee Stanley

Mailing Address 1600 Mapleton #211

City State Zip Code  
Bismarck ND 58503

Purpose of Disbursement

Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 0157574

Date of Disbursement

07 / 14 / 2011

Amount of Each Disbursement this Period

1413.50

C.

Full Name (Last, First, Middle Initial)

Ms. Dee Stanley

Mailing Address 1600 Mapleton #211

City State Zip Code  
Bismarck ND 58503

Purpose of Disbursement

Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 0157585

Date of Disbursement

07 / 21 / 2011

Amount of Each Disbursement this Period

1413.50

SUBTOTAL of Disbursements This Page (optional) .....

5309.19

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NORTH DAKOTA REPUBLICAN PARTY

A.

Full Name (Last, First, Middle Initial)

Ms. Laurie Lynn Eisenbeis

Mailing Address 2205 Highway 1806 S

City  
Fort Rice

State  
ND

Zip Code  
58554-5133

Purpose of Disbursement  
Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 0157586

Date of Disbursement

07 / 21 / 2011

Amount of Each Disbursement this Period

2482.18

SUBTOTAL of Disbursements This Page (optional) .....

2482.18

TOTAL This Period (last page this line number only) .....

7791.37



**METHOD OF ALLOCATION FOR:**

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

NORTH DAKOTA REPUBLICAN PARTY

**USE ONLY ONE SECTION, A or B****A. State and Local Party Committees****Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- X  Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees****Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %Nonfederal.....  %

This ratio applies to (check all that apply):

 Administrative ☐    Generic Voter Drive ☐    Public Communications Referencing Party Only ☐